

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000026603

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: HOME LIFELINE LLC

**Current Principal Place of Business:**

4320 DEERWOOD LAKE PKWY  
101-320  
JACKSONVILLE, FL 32216 US

**New Principal Place of Business:**

**Current Mailing Address:**

4320 DEERWOOD LAKE PKWY  
101-320  
JACKSONVILLE, FL 32216 US

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

DANIEL, TORRES J  
4320 DEERWOOD LAKE PKWY  
101-320  
JACKSONVILLE, FL 32216 US

**Name and Address of New Registered Agent:**

DANIEL, TORRES J MGR  
4320 DEERWOOD LAKE PKWY  
101-320  
JACKSONVILLE, FL 32216 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KEVIN TORRES, AS AGENT

04/30/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DANIEL, TORRES J  
Address: 4320 DEERWOOD LAKE PKWY SUITE 101-320  
City-St-Zip: JACKSONVILLE, FL 32216 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DANIEL J. TORRES

MGR

04/30/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date